12030951457

STATEMENT OF

FORM 1		ORGANIZATION			FECALAL GENTER	
NAME OF COMMITTEE (in	r full)	(Check if name is changed)	Example:If typing, type over the lines.			
LNE GRO	YP LL	C PAC	<u></u>			
			1111111			
ADDRESS (number a	nd street)	1220 HURON	I ROAD SECC	ND FLOC	PR	
(Check if a	ddress		 			
is changed		CLEVELAND			44115	
			CITY	STATE	ZIP CODE	
COMMITTEE'S E-MA	NIL ADDRE	SS (Please provide only one e	e-mail address)			
(Chack if	addraga;	LWEINGART	@LNEGROU	P.COM.	أحد تدريث بالما	
(Check if is change		i Tal di latatada ka	Tell A distributed for the	. 7 · 194 - 184 - 1 · 1 · 1	> 2041 . Laga Lomana a a I	
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	PAGE ADI	DRESS (URL)	And the second of the second o	e de la companya de l	and the Mark Mark State of the Control of the Contr	
(Check if is change	address					
2. DATE 1	6	2012.				
3. FEC IDENTIFIC	CATION N	JMBER C.O	0443234			
4. IS THIS STATE	MENT	NEW (N) OR	AMENDED (A	()		
I certify that I have	examined th	nis Statement and to the bes	et of my knowledge and beli	ief it is true, correct	and complete.	
Type or Print Name	of Treasure	Lee C. Wein	gart			
Signature of Treasure	er	<u> </u>		Date 11	´ 06° ´ 2012``	
NOTE: Submission of	-	eous, or incomplete information ANY CHANGE IN INFORMAT		•	the penalties of 2 U.S.C. §437g.	
Office Use Only			For further informati Federal Election Com Toll Free 800-424-953	mission	FEC FORM 1 (Revised 02/2009)	

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	FEC Fo	rm 1 (Revised 02/2009) Page 2				
	YPE OF COMMITTEE					
(a)	andidate Committee: This committee is a principal campaign committee. (Complete the candidate information below.)					
, ,						
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	ne of didate	<u> </u>				
	didate y Affiliati	Office State Sought: House Senate President District				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate					
Par	ty Con	nmittee:				
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.				
Pol	itical A	action Committee (PAC):				
(e)	\boxtimes	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a				
		Corporation Wo Capital Stock Labor Organization				
		Membership Organization Trade Association Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)				
		In addition, this committee ts a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joir	nt Fund	draising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
	Com	mittees Participating in Joint Fundraiser				
	1.					
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

		_
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	Vrite or Type Committee Name	
L	NE GROUP LLC PAC	
6.	Name of Any Connected Organization; Affiliated Committee, Joint Fundralsing Representative, or Leadership	PAC Sponsor
L	<u> NE Group ILLC </u>	
L		
	Mailing Address 1220 HURON ROAD SECOND FLOOR	
	ICLEVELANDIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	I_I
		CODE
	Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leader	ship PAC Sponsoi
<u>,</u>	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possess books and records.	sion of committee
	Full Name	
	Mailing Address 1220 HURON ROAD SECOND FLOOR	1 1 1 1 1
	CLEVELAND I OHI 144115	
] - [
	Title or Position CITY STATE ZIP	CODE
	PRESIDENT Telephone number 216 - 781	_ 19000
3.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	and address of
	Full Name LEE C. WEINGART of Treasurer	
	Mailing Address 1220 HURON ROAD SECOND FLOOR	
	ICLEVELAND	1-1 1
		CODE
	Title or Position PRESIDENT	_ 9000

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Full Name of Designated Agent	C. WEINGART	 		
Mailing Address	1220 HURON ROAD SECON	ND, FLOOR,		
	CLEVELAND	OH STATE	2IP CODE	
Title or Position		Telephone number [216	[781,[9000,]	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.				
Mailing Address	127 Public Square			
Walling Address	1			
	Cleveland	, , , , , , OH	44114, , _ , , ,	
	CITY	STATE	ZIP CODE	
Name of Bank, Deposito	ry, etc.			
t			,	
		 	<u> </u>	
Mailing Address		 	<u> </u>	
		 		
	CITY	STATE	ZIP CODE	

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate I	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation [™] or Signature Confirm	nation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
G/	11/13/12
PREPÄRER (3/2005)	DATE PREPARED